

REMARKS

In the Office Action, claims 1-20 are rejected under 35 U.S.C. §112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

In the Office Action, claims 1, 2, 5, 12, 13, 15, 16, 18, and 19 are rejected under 35 U.S.C. §102(b) as anticipated by U.S. Patent No. 7,099,718 to Thacker et al.

In the Office Action, claims 3, 4, 6-8, 14, 17, and 20 are rejected under 35 U.S.C. §103(a) as being unpatentable over Thacker et al. as applied to claims 1, 2, 12, 13, 15, 16, 18, and 10 above, and further in view of U.S. Patent No. 6,718,212 to Parry et al.

In response thereto, claim 1 has been cancelled and claims 2-5, 7, 12, 14, 15, and 19 have been amended. Accordingly, claims 2-8 and 12-20 are now pending. Following is a discussion of the patentability of each of the pending claims.

Preliminary Matter

In response to the rejection of claims 1-20 under 35 U.S.C. §112, second paragraph, the following amendments have been made: claim 14, line 10, "fixating" has been replaced with --adapted to fixate--; claim 15, line 9, "fixating" has been replaced with --adapted to fixate--; and claim 19, line 17, "fixating" has been replaced with --adapted to fixate--. Accordingly, withdrawal of the rejection to the claims is respectfully requested.

Independent Claim 14

Claim 14 has been rewritten in independent form and includes all of the elements of base claim 1. Claim 14 recites a lead configured for stimulating a nerve of a patient. The lead comprises a lead body, at least one conductor extending through the lead body, at least one electrode on the lead body and in electrical contact with the at least one conductor, one or more channels that allow for a flow of adhesive or an adhesive component to a nerve site to establish electrical contact between the nerve and the at least one electrode, and an adhesive member fixating the lead body to tissue of the patient. The adhesive member comprises the adhesive or adhesive component to the nerve. The one or more channels comprise a first channel and a second channel. The first channel allows flow of a first chemical component of the adhesive or the adhesive component and the second channel allows flow of a second chemical component of the adhesive or the adhesive component. The first chemical component and the second chemical component are delivered to the tissue at the nerve site.

The Thacker et al. reference is directed to fixating an implantable lead with a single component adhesive. The implantable lead has an electrode array at a distal end. The adhesive has properties that allow it to be injected through a lumen and orifice of the implantable lead.

The Thacker et al. reference does not disclose or suggest an implantable lead comprising a first channel allowing flow of a first chemical component of an adhesive or an adhesive component and a second channel allowing flow of a second chemical component of the adhesive or the adhesive component, wherein the first chemical component and the second chemical component are delivered to the tissue at the nerve site. In the Thacker et al. reference, the implantable lead comprises a single lumen for delivering an adhesive having a single chemical component.

The Parry et al. reference is directed to fixating an implantable lead with a two-component adhesive. The distal tip of the implantable lead comprises a mesh plate that surrounds an electrode. The entire surface of the mesh plate is impregnated or

coated with a light-activated adhesive. The light-activated adhesive layer can be applied to the mesh plate in a viscous state and in a metered amount by a dispenser available from Loctite Corporation. The mesh plate is then enclosed within an opaque and moisture sealed package that is removed just prior to implantation. Alternatively, the light-activated adhesive can be supplied in a container with the lead so that the physician can dispense it in a viscous state in a layer on the mesh plate.

The Parry et al. reference does not disclose or suggest an implantable lead comprising a first channel allowing flow of a first chemical component of an adhesive or an adhesive component and a second channel allowing flow of a second chemical component of the adhesive or the adhesive component, wherein the first chemical component and the second chemical component are delivered to the tissue at the nerve site. In the Parry et al. reference, the first and second components of the adhesive are applied directly to the mesh plate by the physician with a dispenser, and the first and second components are applied before the mesh plate is inserted into a body of the patient. As such, the implantable lead does not require channels for allowing flow of a first chemical component and a second chemical component.

Accordingly, it is respectfully submitted that claim 14 is in condition for allowance.

Dependent Claims 2-8, 12, and 13

Claims 2-8, 12, and 13 depend from claim 14 and are similarly patentable. Accordingly, it is respectfully submitted that these claims are in condition for allowance.

Independent Claim 15

For at least some of the reasons discussed previously with regards to claim 14, it is respectfully submitted that claim 15 is in condition for allowance.

Dependent Claims 16-18

Claims 16-18 depend from claim 15 and are similarly patentable. Accordingly, it is respectfully submitted that these claims are in condition for allowance.

Independent Claim 19

For at least some of the reasons discussed previously with regards to claim 14, it is respectfully submitted that claim 19 is in condition for allowance.

Dependent Claim 20

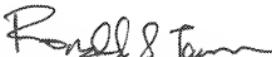
Claim 20 depends from claim 19 and is similarly patentable. Accordingly, it is respectfully submitted that claim 20 is in condition for allowance.

CONCLUSION

In light of the above amendments and remarks, it is respectfully submitted that the application is in condition for allowance, and an early notice of allowance is requested.

Respectfully submitted,

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